



**DEPARTMENT OF HEALTH AND SOCIAL SERVICES
DIVISION OF DEVELOPMENTAL DISABILITIES SERVICES
GOVERNOR'S ADVISORY COUNCIL (GAC)
TO THE DIVISION OF DEVELOPMENTAL DISABILITIES SERVICES (DDDS)**

July 6, 2016

The Governor's Advisory Council to the DDDS met on July 6, 2016, at the 1056 Woodbrook Conference Room in Dover.

COUNCIL MEMBERS PRESENT: Terri Hancharick, Chair
Timothy F. Brooks, Ed.D.
Susan Pereira
Gail Womble
Angie Sipple

COUNCIL MEMBERS ABSENT: Thomas Rust

STAFF MEMBERS PRESENT: Jill Rogers
Marissa Catalon
Vicky Gordy - minutes

GUESTS PRESENT: Carol Kenton, Parent

CALL TO ORDER: The meeting was called to order at 11:10 a.m.

APPROVAL OF MINUTES: The June 16, 2016, minutes were approved w/addition of PM46 Presentation

NEXT MEETING: September 15, 2016; 10 a.m. – 12 p.m.

AGENDA-ADDITIONS: No additions requested

DDDS Strategic Goals & Projects

For the last several months, DDDS Leadership Team has been discussing individual projects and ideas and how those projects fit in at a higher level with larger goals to design a framework of which to work. This will assist with establishing answers to questions at the individual level when aware of the direction of the higher level.

Due to preliminary work and speaking generally, the feeling is that there are many services but they are confusing, not consistent statewide, and not connected. Providers lack the time and resources to think proactively about what people need and will need over time and act responsively. Currently there are over 3000 people living with natural supports that may, at some point, require residential support. At the statewide level, healthcare costs are increasing and continuing to grow which puts downward pressure on DDDS' ability to do other things including some of the supportive services. Delaware's healthcare cost per capita is 25% above the national average although outcomes are average and sometime less than for the general population.

The GAC discussed that when parent's age timeframes become more critical with a different set of challenges and begins to be a larger burden for the family. For strategic planning purposes, it is important to know the number of parents that are over 60 years of age and how many are single parents. It is also important to provide services for families that support each other generationally as siblings begin to care for each other in their homes.

DDDS understands there is an urgent need and began with work completed surrounding "person centered" by pulling from the sentiment and values that are expressed in a variety of ways. Vision statements that DDDS aspires for individual's support to feel included are:

- My different providers understand my complex needs and **work together** to make sure I get the best supports
- My case manager **reaches out to me** to help me manage my health and my daily activities
- I have **easier access** to services and supports
- I have a **personal relationship** with my case manager
- I have **support in my community** to live and make choices

GAC members suggested the addition "family" to have a personal relationship with "team" instead of case manager. DDDS agrees.

Working toward that vision, DDDS' wants to accomplish:

- Changing the way we support individuals and families to expand possibilities and empower
- Support providers to develop needed services and supports, work in teams and better serve each person – especially during service transitions
- Build supportive DDDS infrastructure
- Strengthen the provider workforce through training and capability building
- Build IT tools and resources to provide the right information to right people at the right time.

The above is the strategic approach to work DDDS is completing as when DDDS began to identify potential projects, it was determined that projects were falling into one of the above categories. DDDS expects to give an update of each project, including progress made to the GAC during the fall retreat. DDDS anticipates feedback from the GAC to assist in determining if work is moving DDDS in the right direction.

The first project surrounds Policy Memorandum 46 (PM 46 - concerning Patient Abuse/Injury/Self Harm, etc.) in an effort to reduce the number of incidents. DDDS continues to identify new training options for providers to access to assist with reducing the number of PM 46's. Terry Macy has been speaking with Ukeru, who developed a "trauma-informed approach" training that is a safe, and restraint-free crisis management technique developed by and for behavioral health caregivers and educators. Ukeru is in line with Delaware's priorities, i.e. person centered without restraints.

The proposal bidding process for the ACIST program contractor is completed and Psychotherapeutic Services, Inc. was awarded the contract beginning July 1, 2016. Meetings are scheduled to get project off the ground. This project is expected to provide a significant resource.

GAC suggested the addition of how to take individuals in the community while bringing services with them for support in the community in order to live a life like everyone else. It is understood this will require a higher level of support. DDDS is embracing role in better preparing providers to give supports and to expand the number of providers. DDDS is pleasantly surprised in the number of providers that are interested in doing business in Delaware.

DDDS is currently reviewing the case manager job description in an effort to supply more time to work directly with person and family. Once the electronic case record system is online, case manager's paperwork should be easier to manage. DDDS is aware of the need for consistent training for case managers and family support specialist in order for knowledge of available services to be uniform. The move to the Lifespan Waiver, targeted case management and supplying more structure around services will assist with uniform knowledge of services. DDDS will need to know as we go if the positive changes expected are occurring. DDDS will lean on the GAC, family groups, parent groups, etc. to provide feedback surrounding if changes made are creating expected positive results.

GAC discussed the need for service information being easily assessable to anyone interested. The Delaware Aging and Disability Resource Center (ADRC) provides valuable information for both the aging and disability communities that may be accessed via telephone (800-223-9074), email (DelawareADRC@state.de.us). The ADRC website follows: <https://www.delawareadrc.com/ADRCSearch/Search.aspx>.

Updates

- **Legislative**

Pay increases for state employees include a 1.5% increase or \$750.00 (whichever is greater), effective October 1, 2016.

Supported Decision Making passed with an amendment.

The CARE Act, which had implications for DDDS passed with language that included education for paid direct support provider.

The Autism Network, Senate Bill 93 passed with \$500,000 to support that work.

The provider increase, House Bill 433 that was proposed did not pass although a fiscal note describing the cost over the next four years was submitted.

- **Personnel**

Lynda Lord is the new Director of the Office of Quality Improvement although on June 1st she assumed the role of Director of Professional Services in an acting capacity until the position is filled. Both the Director of Professional Services and the vacant Resident's Protection Administrator positions were specifically defined to function in an institution; therefore, proposed language was submitted allowing both of those roles to be carried out regardless of where the people served are living. Once approved, both positions will be posted.

Mary Anderson retired which vacated the Developmental Disability Program Administrator position that she held. Once the PM46 review is completed, the outcome will assist DDDS in evaluating where work will best be suited for position.

Sarah Marvian retired which vacated the Psychologist position. Contracted psychologists are completing evaluations for eligibility. DDDS is determining functions carried out by the position to determine if psychologists in the community are better suited to perform functions in the spirit of keeping things connected to the health care system as opposed to setting up a parallel system.

The Behavior Analysis Supervisor for Kent and Sussex County, Lowell Thomas retired. This supplies an opportunity to think about what the behavior analysis function looks like, how overseen, and to what extent the contracted provider community may fill.

Stephen Perales accepted the position as the new DDDS Data Unit Director and began employment yesterday. Mr. Perales came to DDDS from DSCYF, Prevention and Behavior Health and has a strong background in social services and children services. His immediate role is getting the CX360 conversion project off the ground. His larger purpose is to create strategy for DDDS data. Contracted staff (statisticians and epidemiologists) will support Mr. Perales as he develops the strategy.

- **Community Rule Transition**

There were a couple of edits that needed to be submitted to CMS by June 30th, but it feels like were on the verge of being approved. Currently, three states received CMS approval. DDDS website information continues to be discussed during quarterly provider meetings.

Looking Ahead – Fall Retreat

GAC members will be advised of the date of the Retreat once determined.

Agenda items include:

- Law surrounding medical records confidentiality and changes to law GAC would support (may invite Ann Woolfolk to retreat to address).
- Senate Bill 142, sponsored by Senator Bethany Hall-Long, extending dental care to Delaware eligible Medicaid recipients, passed without funding attached. Once funding is available, dental services may be covered under the adult Medicaid program. This is a great first step as Senator Hall-Long has put this legislation forth for approximately 8-9 years.
- House Bill 428, introduced yesterday allows a dental hygienist access to certain facilities to provide dental hygiene services.
- How Practice Without Pressure operates without sedation. DDDS has many dental contracts. Reportedly, a dentist who directs dental services at Wilmington Hospital is involved with people with disabilities.
- Universal dental sedation of DDDS served individuals
- Hold GAC Chair election

Other Business

At GAC suggestion, DDDS Leadership will investigate possibility of creating a DDDS hotline to report complaints that may raise to a PM 46 level.

Adjournment

The meeting adjourned at 11:25 a.m.